

# Institute for Community Health Program Planning (iCHPP)







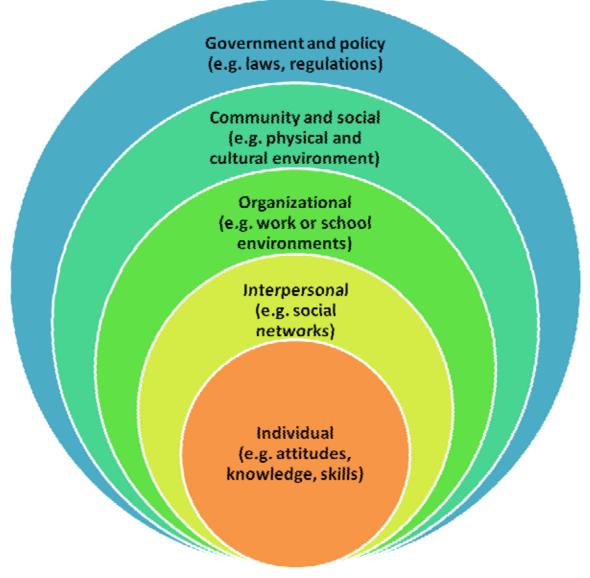
### Homework review



- PLANET MassCONECT portal experience
- Using data
- Partnerships
- Approaches



### Social ecological model: Multi-level thinking





Adapted from: McLeroy, K.R., et al., *An Ecological Perspective on Health Promotion Programs.* Health Education Quarterly, 1988. **15**(4): p. 351-377.



Step 2: Find Partners

Step 4

Evaluate

Step 3: Explore Approaches

Step 4a: Choose a Program

Step 4b: Customize and Localize



### Two complementary stages

- Step 4a <u>Choose</u> our evidence-based program
- Step 4b <u>Customize and localize</u> the program to meet our needs



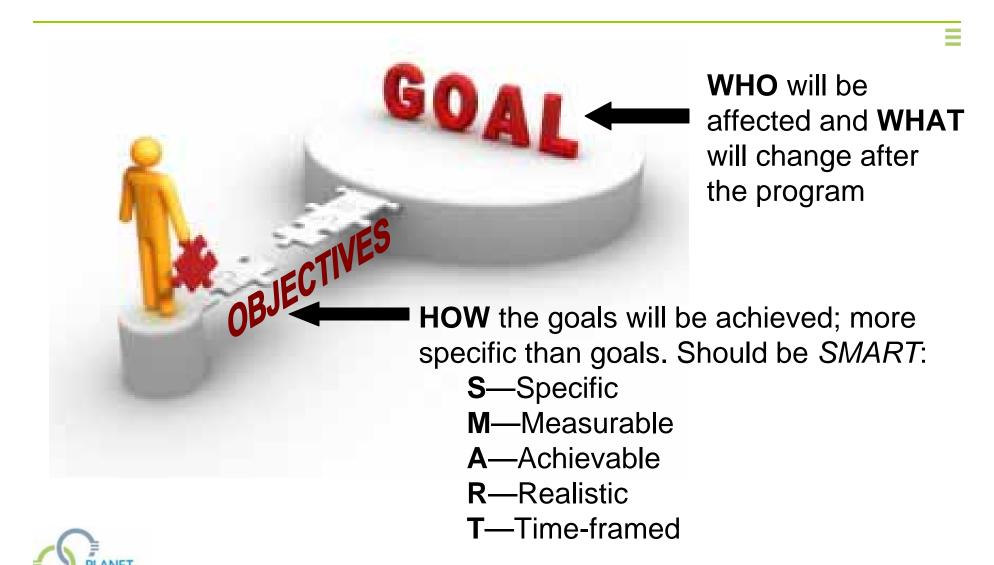


### Step 4a overview: Choose an evidence-based program

- Create program goals
- Create program objectives
- Consider criteria to select a program



### Goals and objectives



### Example: Smoking prevention program

Goal: To prevent smoking initiation among middle school students.

### Objectives:

- After completing the 12-week program, 75% of program participants will be able to identify the 10 ill-health effects of smoking.
- After completing the 12-week program, 75% of program participants will be able to identify 7 strategies for quitting smoking.
- Within one school year, the school board will approve a policy to require tobacco counseling for all students found using or in possession of tobacco products on school property.





Exercise:

Develop goals and objectives



### **Exercise:**

- Define one goal Marie might set
- List two objectives related to that goal at least one should be policy-oriented

Try to keep them SMART

S—Specific

M—Measurable

A—Achievable

R—Realistic

T—Time-framed







### Program selection (I)



- Program Fit
  - Same health topic
  - Match with goals and objectives
  - Match between available and required resources (financial, labor, staff capacity, etc.)
  - Developmentally and culturally appropriate
- Target Audience
  - Match between studied and target population



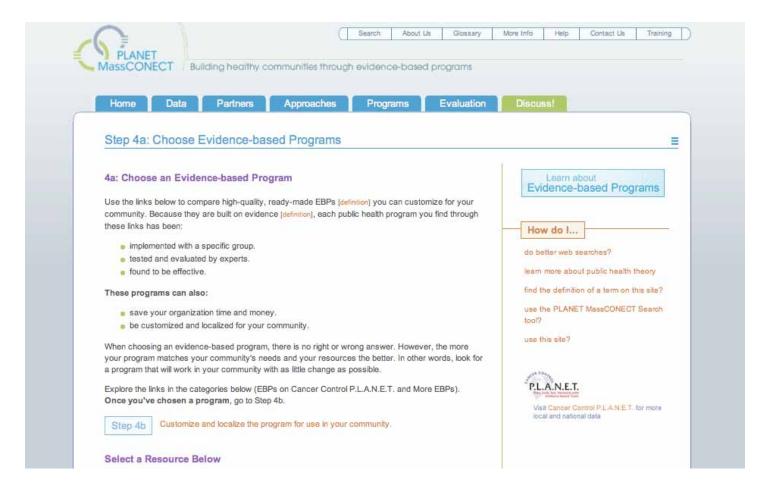
### Program selection (II)

- Evaluation
  - Availability of materials
  - Match with goals and objectives
- Customization
  - Level of adaptation required
  - Investment / resources required
  - Guidance through adaptation (manuals or technical assistance)





### Demonstration: Search strategy





### Case Study





### Discussion / Exercise



- Using her goals and objectives, what search criteria would you suggest she use to find appropriate programs?
- Search for programs on RTIPS

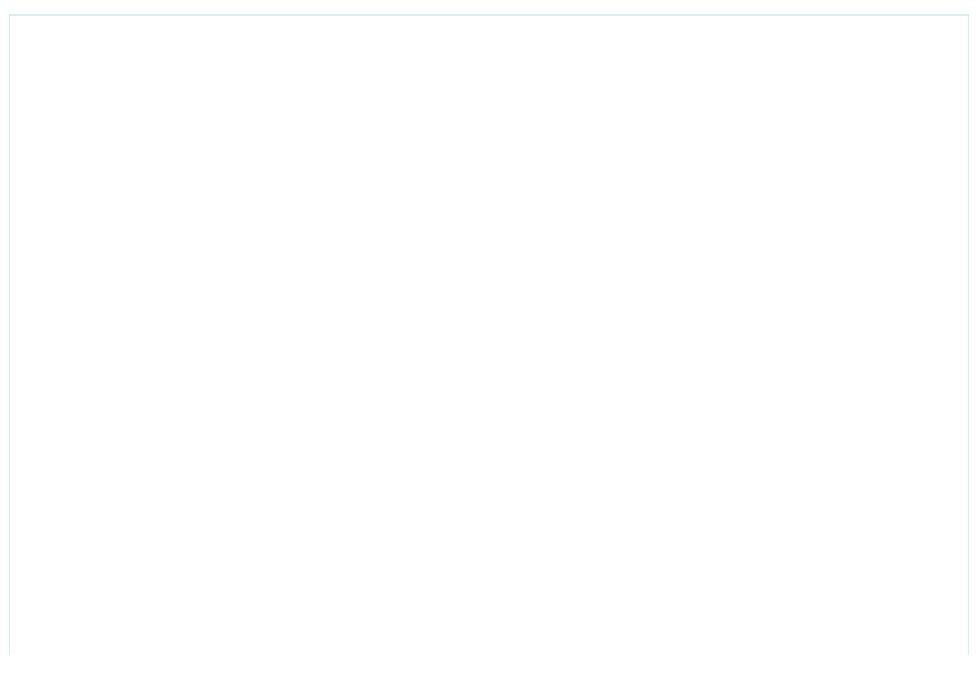


### Marie's search criteria

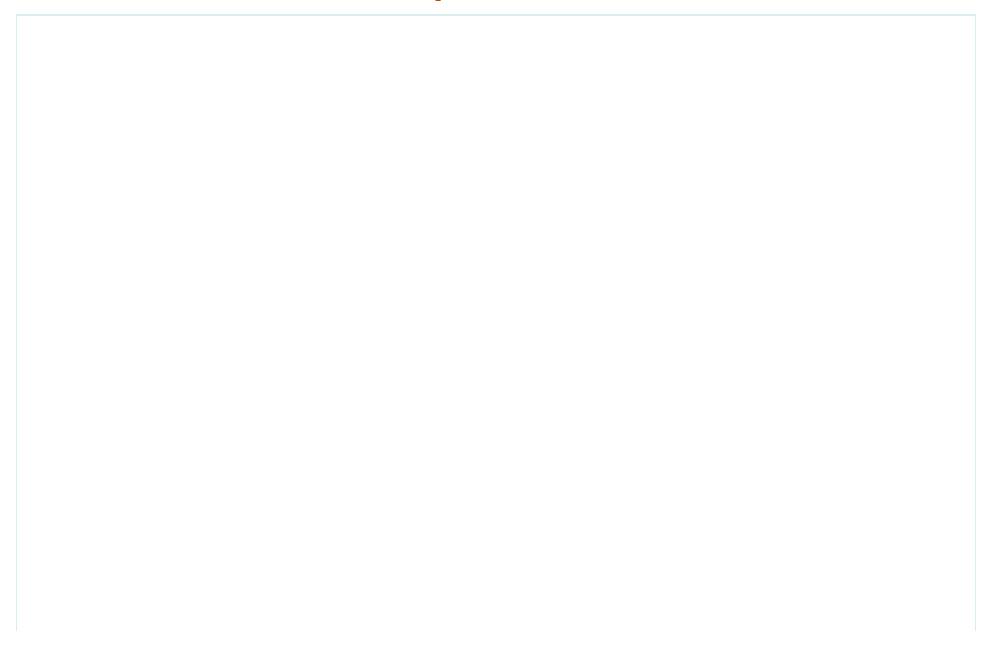
- Adolescent population
- School-based
- Prevents / reduces tobacco use













Step 1: Review Data

Step 2: Find Partners

Step 4

Evaluate

Step 3: Explore Approaches

Step 4a: Choose a Program

Step 4b: Customize and Localize



### Step 4b overview: Customize and localize your program

- Make our chosen program more relevant, while staying true to the program design
- Stay within the guidelines of what we can and cannot change in an EBP
- Pilot-test the changes we have made





# You have made your choice, now what?

- EBPs may be tested and proven effective in a setting unlike yours
- Make adjustments to increase impact
- Often called "program adaptation," the key is to customize and localize
  - The process of changing or modifying an existing program to fit new audiences, conditions, or contexts





### Local voices

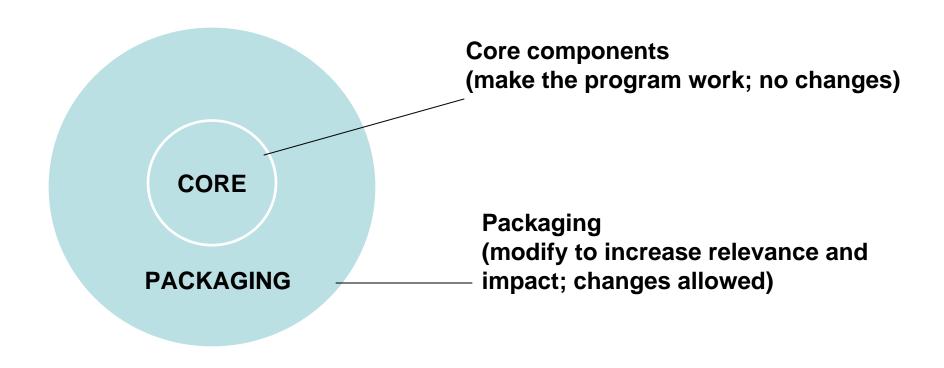
"I'm thinking like, across the country. So, if something may work really well in the Midwest, you have to think of inner city populations of people... you're gonna definitely find, clearly, a difference in what works, scientifically, here."

Practitioner, Boston



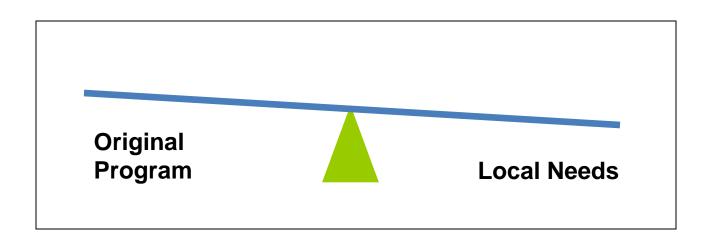
### What we can / can't change







### Balance is everything

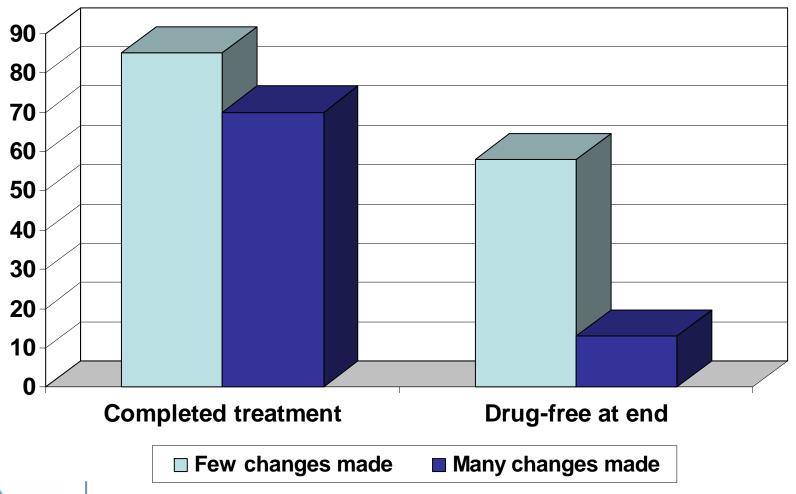


- Need to be sure each change is necessary and "worth" the risk of changing the program too much
- Staying true to the program = "program fidelity"





## Example: Assertive community treatment





Source: McHugo, G. J., Drake, R. E., Teague, G. B., et al (1999) Fidelity to assertive community treatment and client outcomes in the New Hampshire dual disorders study. Psychiatric Services, 50, 818-824

### Common adaptation targets

Category	Examples
Group characteristics	– Language
	- Ethnicity
	<ul> <li>Socioeconomic status</li> </ul>
	<ul><li>Urban-rural context</li></ul>
	<ul> <li>Risk factors (number and severity)</li> </ul>
	<ul><li>– Family structure</li></ul>
Administrative / community factors	<ul> <li>Level of community consultation</li> </ul>
	<ul> <li>Community readiness for change</li> </ul>
Resources	- Number of staff available
	<ul> <li>Facilities / materials available</li> </ul>
	- Type of staff available

### Acceptable adaptations - Examples

- Translating materials
- Changing word choices
- Replacing images for relevance
- Replacing cultural references
- Modifying aspects of activities
- Ways to reach your audience
- Improving clarity of materials



See Handout #3: Acceptable and Risky Adaptations.

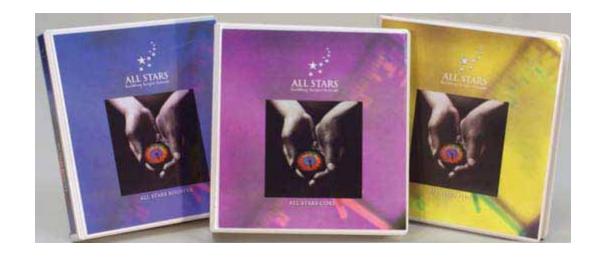
### Risky / unacceptable adaptations - Examples

- Changing the number / length of sessions
- Lowering the level of participant engagement
- Eliminating key messages or skills learned
- Removing topics or sections of the program
- Using staff or volunteers who are not adequately trained or qualified
- Using fewer staff members than recommended
- Changing the theoretical approach



See Handout #3: Acceptable and Risky Adaptations.

# Example: All Stars Recipe for Success



- Deliver the core program in 6th or 7th grade, followed by the booster curriculum the next year.
- Teach at least one lesson per week until all lessons are complete (14 Core + 8 Booster).
- Teach lessons in order.
- Use interactive teaching strategies.
- Teach lessons for a full class session: 40-45 minutes.
- Use all materials for each lesson.
- Conduct a celebration ceremony at the end of the core program.



### Reasons to pilot test

- Your audience differs from the one the program was tested with
- You plan to use a different mode of delivery (one-on-one instead of group setting)
- Limited resources mean you cannot deliver the program as intended
- You have translated the materials into another language or made changes for readability



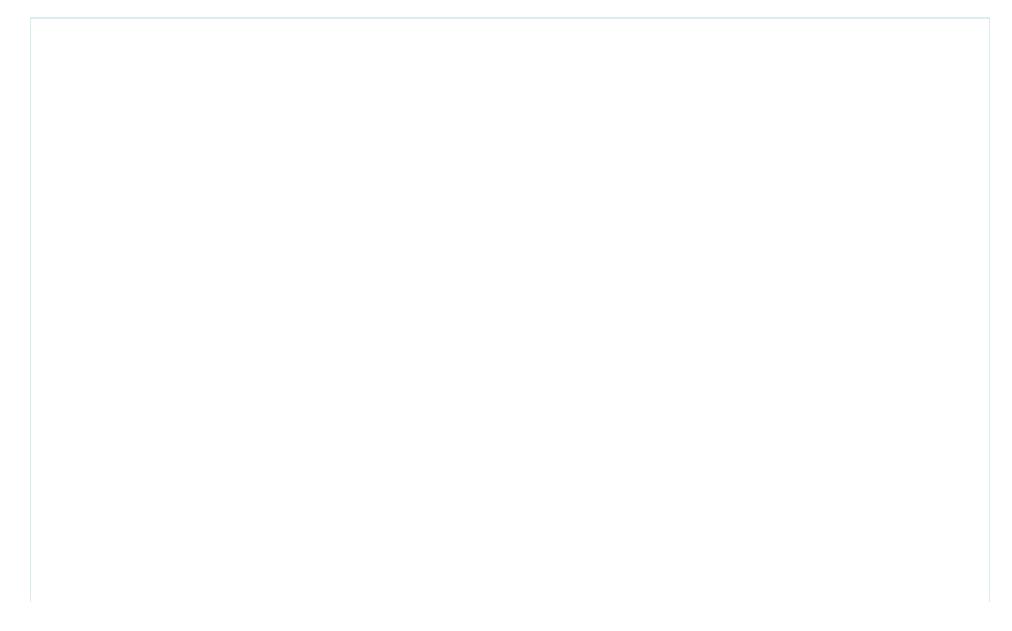
### Case Study



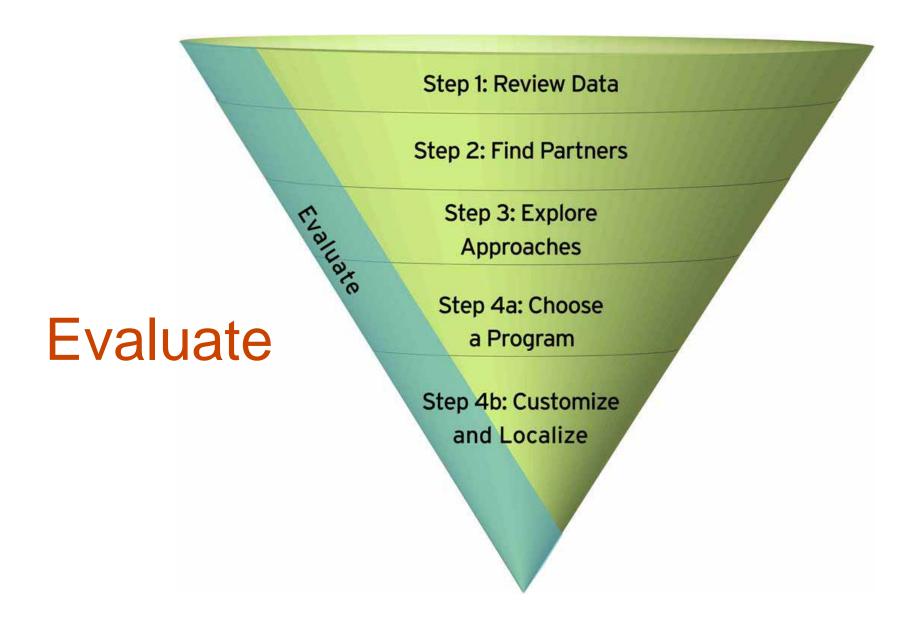
- Given her limited resources and need to maintain program fidelity:
  - What would you suggest she customize?
     Please use Handout 3 to help her decide what adaptations are necessary.
  - How would you suggest she test any modifications?













#### **Evaluation overview**

- Making the most of evaluation
- Evaluation methods and stages
- Measuring and sharing outcomes



#### Why evaluate?

- Opportunity to
  - Identify successes and opportunities for improvement
  - Assess the organization's investment
  - Manage resources and services effectively
  - Leverage positive results

#### **AND**

Requirement from funder, sponsor, etc.



# Example: Evaluation of ONDCP Anti-drug campaigns

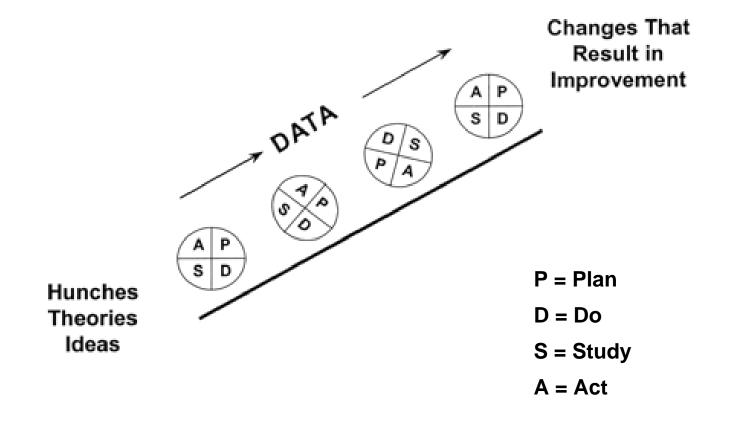








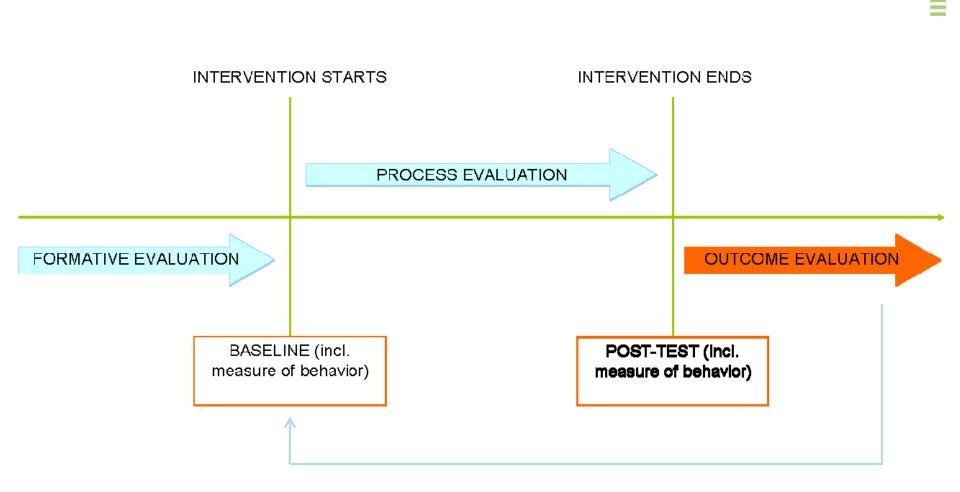
#### Driving change with evidence





The Breakthrough Series: IHI's Collaborative Model for Achieving Breakthrough Improvement, 2003.

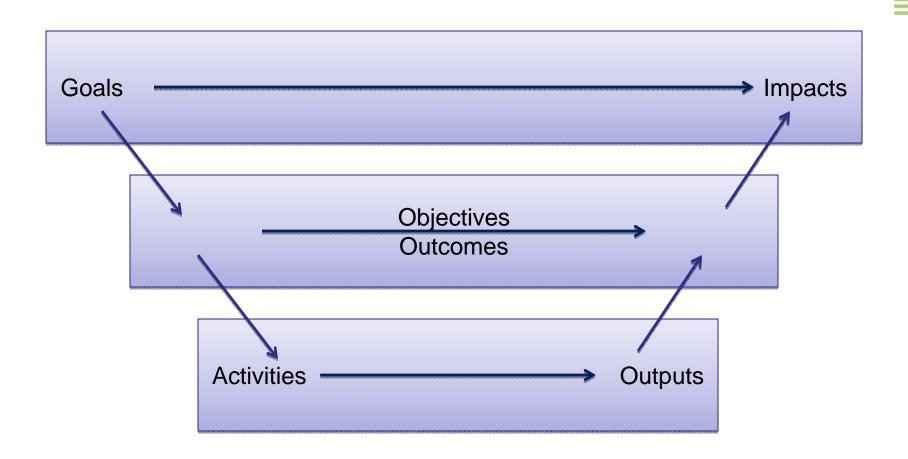
#### Different types of evaluation





Resources available on portal

#### Putting it all together





#### Example: Formative evaluation

- All Stars Program: Pilot-testing led to
  - Revising the survey to be more user-friendly
  - Understanding the nicknames used by local teenagers for substances of interest

- Policy change around smoking ban
  - Assessment of community readiness



#### Example: Process evaluation

#### Connectedness Tracking Log

Carol White Physical Education Program - After School Program 2006-2007
Week of

Initial your name for the days when you make a connection with a child or a parent. (A connection is defined as a positive one-on-one personal discussion, alone or within a 2-3 person group, of something uniquely important to the child.)

C - Connection with the child (At least once a day per child)

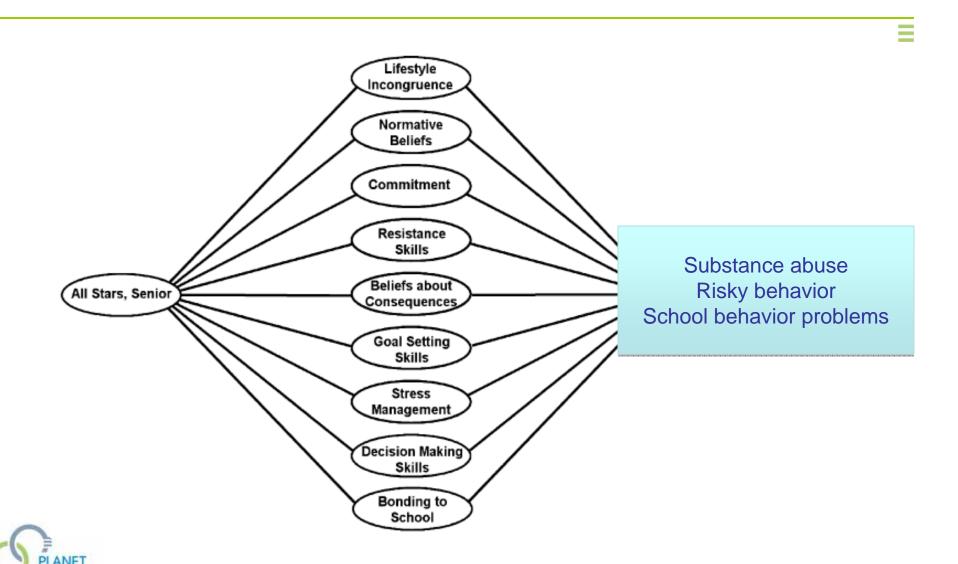
P - Connection with the child's parent/guardian (At least once a week per child)

++	
1.4.	

Child's Name	M	Mon		Tues		Wed		Thurs		Fri	
	С	Р	С	Р	С	Р	С	Р	С	Р	



#### Outcome evaluation: All Stars, Senior



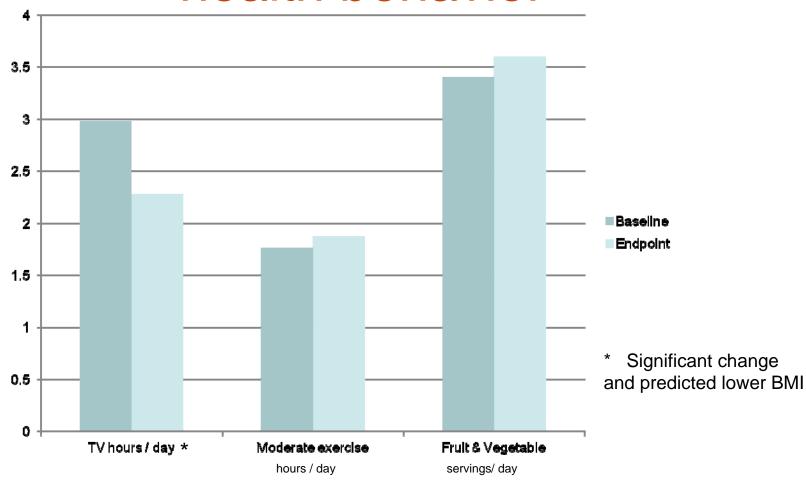
#### Mapping out the evaluation plan

	Student surveys x3	Focus groups – students	Focus groups – teachers	Class observatio n	Teaching logs	Case Study
Program components' impact on key behaviors	X	X				
Program components; impact on intermediate markers	X	X				
Impact of moderating variables (fidelity, dosage, rapport) on behaviors	X	X	X	X	X	X





# Example: Intermediate markers for health behavior





Gortmaker SL, Peterson K, Wiecha J, et al. Reducing obesity via a school-based interdisciplinary intervention among youth: Planet Health. Arch Pediatr Adolesc Med. April 1999;153(4):409-418.

## Example: Intermediate markers for environmental-level change

- Raising awareness in the community around the issue of fruit and vegetable consumption
- Worked with coalition targeting nutrition that addresses food deserts
- Engaged with policymakers and decisionmakers to provide incentives





#### After the evaluation is in...

- Disseminating results to key stakeholders can
  - Generate support for programs
  - Share important findings
- How best to disseminate?



#### Example: MassCONECT Briefs



#### MassCONECT Researchers Explore How Journalists Write About Health Disparities

The media plays a big part in how health information is presented. Reporters don't just report the news—they decide what they think people will want to learn and then frame the stories.

MassCONECT researchers from Dana-Farber Cancer Institute (DFCI) and Harvard School of Public Health (HSPH) wanted to learn more about how reporters and journalists work. The researchers studied journalists whose writing reaches people in Boston, Lawrence, and Worcester. These three communities are all represented by MassCONECT. The information that the MassCONECT

team collected from the journalists showed how reporters decide which stories to write and what challenges they face. The team also learned that the reporters' own knowledge about health disparities can affect their story angles. Even more importantly, the information showed how MassCONECT members can influence the way that health disparities are presented and perceived in the media.

How this study can help your work

· Community groups are encouraged to provide local

## Example: Legislators' breakfast in Worcester

- Presentations from researchers and public health officials to city and state legislators on:
  - Mental health issues among Latinos
  - Social network analysis as a tool for public health
  - Homeless youth
- Networking opportunity

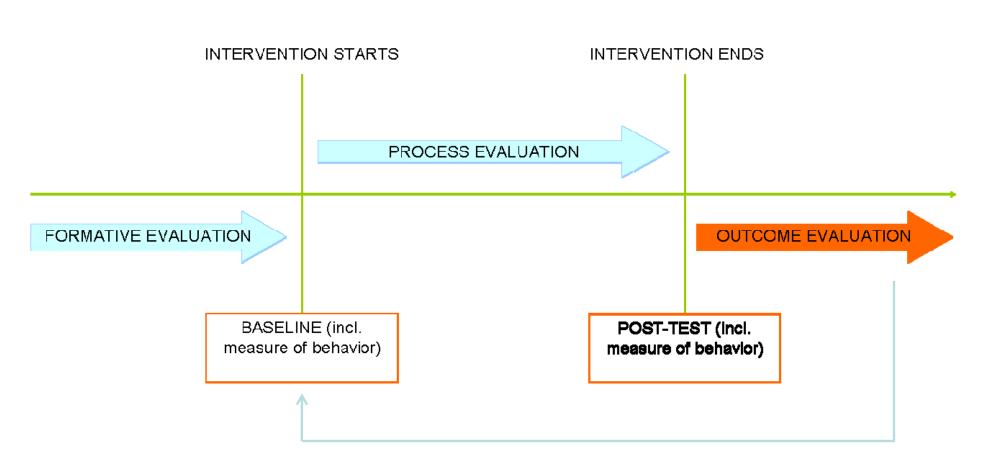




## Case Study



## Marie's evaluation plan





#### Marie's formative evaluation

- Collected data to demonstrate need
  - Sales data: Compliance checks
  - Youth data: School survey
  - Adult data: CHNA Map
  - Program assessment: Populations served
- Pilot tested
  - Held focus groups with students to ensure changes to program resonated

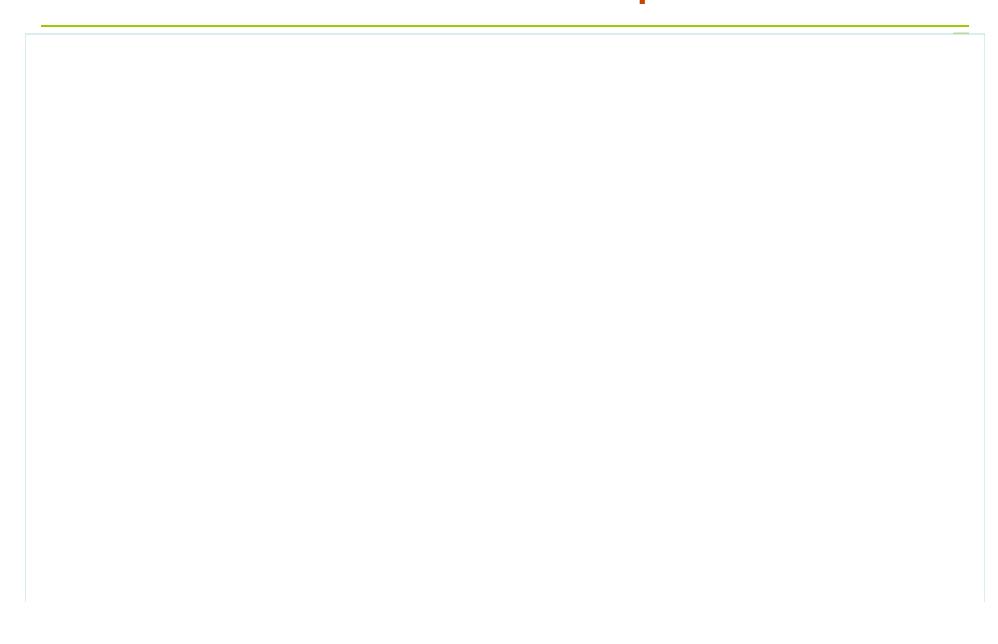


#### Discussion

- Process evaluation
  - What should she track?
  - When?



### Process evaluation plan



#### Discussion

- Outcome evaluation
  - How will she measure outcomes?
  - When will she measure outcomes?



### Outcome evaluation plan



# Project EX-4 Survey Questions



Step 1: Review Data

Step 2: Find Partners

Stepped approach to program planning

Step 3: Explore Approaches

Step 4a: Choose a Program

Step 4b: Customize and Localize



#### What's next?

- We value your feedback. Please complete your surveys!
- Look for planning grant opportunities.
- Visit <u>www.planetmassconect.org</u> for updates, discussions with colleagues, and more!
- Spread the word!



#### Networking event

 Please join us at our next alumni event.
 Cassandra Andersen will contact you with additional details about this opportunity to meet other alums and receive additional training.



#### THANK YOU!

